_	ROSE HARDING	135769925	Order No.	200700080461	
_	Obligee/Custodial Parent	RIN	_		
	Vs.				
_	SIMEON W. AMEN RA	123066953	IV-D No.	C01055196	
	Obligor/Non-Custodial Parent	RIN			
	PROOF OF SERVINCOME WITHHOLD	ICE OF JUDI	CIAL PORT		
Copies of NOVEMBER PO BOX 1		ng for Suppo d to BNSF R	rt prepared in AILWAY COMPANY	the above case on payor at	
TOLEKA		gor at		and	
				; by:	
×	Ordinary mail				
	Certified mail, return receip	ot requested			
	Facsimile transmission or oth	ner electron	lc means		
	Personal delivery				
	Other method provided by law	for service	of a summons		
Service w	as made on the 21ST day of	NOVEMBER,	2014		
	CERT	TIFICATION			
Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this form HFS 2584 are true and correct, except as to matters therein stated to be on information and belief and as to such matters the undersigned certifies as aforesaid that he/she verily believes the same to be true.					
		Division	n of Child Support	Services	
		Ву:	SHONTE LITTLE		
			CUSTOMER SERVICE		
		•	PO BOX 641097		
		-	CHICAGO IL 60664-	1097	
		-			

HFS 2584 (R-7-10) (SEQ: 1677F)

http://www.ChildSupportIllinois.com

1L478-1238

D

2

IL Dept of Healthcare and Family Services Division of Child Support Services

INCOME WITHHOLDING FOR SUPPORT

ORIGINAL INCOME WITHHOLDING ORDER/NOTICE FOR SUPPORT (IWO)					
X AMENDED IWO					
ONE-TIME ORDER/NOTICE FOR LUMP SUM PAYMENT					
TERMINATION OF IWO Date: NOVEMBER 21, 2014					
X Child Support Enforcement (CSE) Agency Court Attorney					
Private Individual/Entity (Check One)					
NOTE: This IWO must be regular on its face. Under certain circumstances you must reject thi	- TNO				
and return it to the sender (see IWO instructions http://www.acf.hhs.gov/programs/cse/forms/OMB-0970-0154 instructions.pdf). If you receive the document from someone other than a State or Tribal CSE agency or a Court, a copy of the under order must be attached.	ds				
State/Tribe/Territory State of IL Remittance Identifier (include w/payment) City/County/Dist./Tribe COOK 1703100/2007D0080461					
Private Individual/Entity Order Identifier 2007D0080451					
CSE Agency Case Identifier C01055196					
BNSF RAILWAY COMPANY RE: AMEN RA, SIMEON W. Employer/Income Withholder's Name					
PO 80X 1738 Employer/Income Withholder's Address Employee/Obligor's Social Security Number					
TOPEKA KS 66601-1738 HARDING, ROSE CUBtodial Party/Obligec's Name (Last, First, MI)					
Employer/Income Withholder's FEIN Employer	r				
Child(ren)'s Name(s) (Last, First, MI) Child(ren)'s Eirth Date(s)					
ORDER INFORMATION: This document is based on the support or withholding order from Illinois (State/Tribe). You are required by law to deduct these amounts from the employee/obligor's i until further notice. \$ 300.00 per T-MO current child support \$ per past-due child support - Arrears greater than 12 weeks? yes \$ per current cash medical support \$ per past-due cash medical support \$ per past-due cash medical support \$ per current spousal support \$ per current spousal support \$ per past-due spousal support \$ per current spousal support	ncome X no				
for a Total Amount to Withhold of \$ 300.00 per T-MO .					
AMOUNTS TO WITHHOLD: You do not have to vary your pay cycle to be in compliance with the Ord Information. If your pay cycle does not match the ordered payment cycle, withhold one of the following amounts:	er				
\$ 138.46 per weekly pay period \$ 300.00 per semimontally pay period (twice a per bi-weekly pay period (every two weeks) \$ 600.00 per montally pay LUMP SUM PAYMENT. Do not stop any existing IWO unless you receive a termination	period.				
REMITTANCE INFORMATION: If the employee/obligor's principal place of employment is Illinois (State/Tribe), you must begin withholding no later than the first pay period that occurs 14 d after the date of 11/21/2014. Send payment within 7 working days of the pay date. If you ca withhold the full amount of support for any or all orders for this employee/obligor, withhold 65 % of disposable income for all orders. If the employee/obligor's principal place of emplication is (State/Tribe), other withholding limitations, time requirements, and any all employer fees at http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contact_map.hifter the employee/obligor's principal place of employment.	nnot up to loyment owable				
112114 C01055196 135769925 123066953 2007D0080461					
Document Tracking Identifier OMB 09' HFS 3683 (R-12-12) (SEQ: 1674F)	70-0154				

E D

2

97 /8 #

₹2-09-14;00:47AM; 524 4617

For electronic payment requirements and centralized payment collection and disbursement facility information (State Disbursement Unit (SDU)), see http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contact_map.htm.

Include the Remittance Identifier with the payment and if necessary this FIPS Code: 1703100/2007D0080461

Remit payment to: _State Disbursement Unit	(50U/Tribal Order Payee)
at PO Box 5400 Carol Stream IL 60197-5400	(SDU/Tribal Payee Address)
Return to Sender (Completed by Employer/Income Wi in accordance with 42 USC 666(b)(5) and (b)(6) or payment is not directed to an SDU/Tribal Payee or check this box and return the IWO to the sender.	Tribal Payee (see Payments to SDU below). If
Signature of Judge/Issuing Official (if required by S Print Name of Judge/Issuing Official: <u>Healthcare</u> and	tate or Tribal law);
Title of Judge/Issuing Official: Division of Child S Date of Signature:	

If the employee/obligor works in a State or for a Tribe that is different from the State or Tribe that issued this order, a copy of this IWO must be provided to the employee/obligor.

If checked, the employer/income withholder must provide a copy of this form to the employee/obligor.

ADDITIONAL INFORMATION FOR EMPLOYERS/INCOME WITHHOLDERS

State-specific contact and withholding information can be found on the Federal Employer Services website located at:

http://www.acf.hhs.goy/programs/cse/newhire/employer/contacts/contacts_map,htm

Priority: Withholding for support has priority over any other legal process under State law against the same income (USC 42 666(b)(7)). If a Federal tax levy is in effect, please notify the sender,

Combining Payments: When remitting payments to an SDU or Tribal CSE agency, you may combine withheld amounts from more than one employee/obligor's income in a single payment. You must, however, separately identify each employee/obligor's portion of the payment.

Payments to SDU: You must send child support payments payable by income withholding to the appropriate SDU or to a Tribal CSE agency. If this IWO instructs you to send a payment to an entity other than an SDU (e.g., payable to the custodial party, court, or attorney), you must check the box above and return this notice to the sender. Exception: If this IWO was sent by a Court, Attorney or Private Individual/Entity and the initial order was entered before January 1, 1994 or the order was issued by a Tribal CSE agency, you must follow the "Remit payment to" instructions on this form.

Reporting the Pay Date: You must report the pay date when sending the payment. The pay date is the date on which the amount was withheld from the employee/obligor's wages. You must comply with the law of the State (or Tribal law if applicable) of the employee/obligor's principal place of employment regarding time periods within which you must implement the withholding and forward the support payments.

Multiple IWOs: If there is more than one IWO against this employee/obligor and you are unable to fully honor all IWOs due to Federal, State, or Tribal withholding limits, you must honor all IWOs to the greatest extent possible, giving priority to current support before payment of any past-due support. Follow the State or Tribal law/procedure of the employee/obligor's principal place of employment to determine the appropriate allocation method.

Lump Sum Payments: You may be required to notify a State or Tribal CSE agency of upcoming lump sum payments to this employee/obligor such as bonuses, commissions, or severance pay. Contact the sender to determine if you are required to report and/or withhold lump sum payments.

Liability: If you have any doubts about the validity of this IWO, contact the sender. If you fail to withhold income from the employee/obligor's income as the IWO directs, you are liable for both the accumulated amount you should have withheld and any penalties set by State or Tribal law/procedure. See attached supplemental sheet for details regarding: "Duties of, and Fines and Penalties Applicable to, the Payor Under Illinois Law."

Anti-discrimination: You are subject to a fine determined under State or Tribal law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against an employee/obligor because of this IWO. See attached supplemental sheet for details regarding: "Rights, Remedies and Duties of the Obligor Under Illinois Law."

OMB Expiration Date - O5/31/2014. The OMB Expiration Date has no bearing on the termination date of the IWO; it identifies the version of the form currently in use.

135769925

112114 CO1055196

123066953

2007D0080461

HFS 3683 (R-12-12) (SEQ: 1674B)

#

#

М

A

G

E

D

2

2

97 /p # 2194 t29 712; WA74: 60-11

Employee/Obligor's Name: SIMEON W. AMEN RA						
CSE Agency Case Identifier C01055196 Order Identifier: 1703100/2007D0080461						
Withholding Limits: You may not withhold more than the lesser of: i) the amounts allowed by the						
Federal Consumer Credit Protection Act (CCPA) (15 U.S.C. 1673(b)); or 2) the amounts allowed by the State or Tribe of the employee/obligor's principal place of employment (see REMITTANCE INFORMATION). Disposable income is the net income left after making mandatory deductions such as: State, Federal local taxes, Social Security taxes, statutory pension contributions and Medicare taxes. The Federal limit is 50% of the disposable income if the obligor is supporting another family and 60% of the disposable income if the obligor is not supporting another family. However, those limits increase 5% - to 55% and 65% - if the arrears are greater than 12 weeks. If permitted by the State or Tribe, you may deduct a fee for administrative costs. The combined support amount and fee may not exceed the limit indicated in this section.						
For Tribal orders, you may not withhold more than the amounts allowed under the law of the issuing						
Tribe. For Tribal employers/income withholders who receive a State IWO, you may not withhold more than the lesser of the limit set by the law of the jurisdiction in which the employer/income withholder is located or the maximum amount permitted under section 303(d) of the CCPA (15 U.S.C. 1673 (b)).						
Depending upon applicable State or Tribal law, you may need to also consider the amounts paid for health care premiums in determining disposable income and applying appropriate withholding limits.						
Arrears greater than 12 weeks? If the Order Information does not indicate that the arrears are greater than 12 weeks, then the Employer should calculate the CCPA limit using the lower percentage.						
Additional Information:						
NOTIFICATION OF EMPLOYMENT TERMINATION OR INCOME STATUS: If this employee/obligor never worked for you or you are no longer withholding income for this employee/obligor, an employer must promptly notify the CSE agency and/or the sender by returning this form to the address listed in the Contact Information below:						
This person has never worked for this employer nor received periodic income.						
This person no longer works for this employer nor receives periodic income.						
Please provide the following information for the employee/obligor:						
Termination date: Last known phone number:						
Last known address:						
Final payment date to SDU/Tribal Payee: Final payment amount:						
New employer's name: New employer's address:						
CONTACT INFORMATION:						
To Employer/Income Withholder: If you have any questions, contact the Income Withholding Unit (issuer name) by phone at (312) 803-7253, Toll Free: 1-888-245-1938, by fax at (888) 227-0370, by email or website at: www.ChildSupportIllinois.com .						
Send termination/income status notice and other correspodence to:						
IL Dept of Healthcare and Family Services Division of Child Support Services PO Box 641097 Chicago IL 60664-1097 (Issuer address).						
To Employee/Obligor: If the employee/obligor has questions, contact the Income Withholding Unit (Issuer name) by phone at <u>(312) 803-7253, Toll Free: 1-888-245-1938</u> , by fax at (888) 227-0370, by email or website at www.ChildSupportIllinois.com .						
IMPORTANT: The person completing this form is advised that the information may be shared with the employee/obligor.						
112114 C01055196 135769925 123066953 2007D0080461						
HFS 3683 (R-12-12) (SEQ: 1675F)						

М

G E D

2

٥

Employer's Name: BNSF RAILWAY COMPANY Employer FEIN:

97 /9 # \(\text{LO1:60-11}\) \(\text{O:4}\) \(\text{WYL}\) \(\text{CO1:60-71}\)

Duties of, and Fines and Penalties Applicable to, the Payor Under Illinois Law:

- 1) The payor shall deduct the amount designated in the income withholding notice, as supplemented by any notice provided pursuant to section 45(f) of the Income withholding for Support Act, beginning no later than the next payment of income which is payable or creditable to the obligor that occurs 14 days following the date the income withholding notice was mailed, sent by facsimile or other electronic means, or placed for personal delivery to or service on the payor. The payor may combine all amounts withheld for the benefit of an obligee or public office into a single payment and transmit the payment with a listing of obligors from whom withholding has been effected. The payor must pay the amount withheld to the State Disbursement Unit within 7 busines days after the date the amount would but for the duty to withhold income) have been paid or credited to the obligor. If the payor knowingly fails to withhold the amount designated in the Income Withholding Notice or to pay the amount would have been paid or credited to the obligor, the payor shall pay a penalty of \$100 for each day that the amount designated in the income withholding notice (whether or not withheld by the payor) is not paid to the State Disbursement Unit after the period of 7 business days has expired. The total penalty for a payor's failure, on one occasion, to withhold or pay to the State Disbursement Unit and amount designated in the income withholding notice may not exceed \$10,000. This penalty may be collected in a civil action which may be brought against the payor in favor of the obligee or public office. An action to collect the penalty may not exceed \$10,000. This penalty may be collected in a civil action which may be brought against the payor in favor of the obligee or public office. An action to collect the penalty may not be brought more than one year after the date of the payor's alleged failure to withhold or pay income. For each withholding, the payor shall provide the State Disbursement Unit, at the time of transmitted to recei
- 2) If, any unpaid arrearage or delinquency equal to at least one month's support obligation exists on the termination date stated in the order for support or, if there is no termination date stated in the order, on the date the child attains the age of majority or is otherwise emancipated, then the periodic amount required to be paid for current support of that child immediately prior to that date shall automatically continue to be an obligation, not as current support but as periodic payment toward satisfaction of the unpaid arrearage or delinquency. That periodic payment shall be in addition to any periodic payment previously required for satisfaction of the arrearage or delinquency. The total periodic amount to be paid toward satisfaction of the arrearage or delinquency may be enforced and collected by any method provided by law for the enforcement and collection of child support, including but not limited to income withholding under the Income withholding for Support Act.
- 3) Income available for withholding shall be applied first to the current support obligation, then to any premium required for employer, labor union, or trade union related health insurance coverage ordered under the order for support, and then to payments required on past-due support obligations. If there is insufficient available income remaining to pay the full amount of the required health insurance premium after withholding of income for the current support obligation, then the remaining available income shall be applied to payments required on past-due support obligations. If the payor has been served with more than one income withholding notice pertaining to the same obligor, the payor shall allocate income available for withholding on a proportionate share basis, giving priority to current support payments. No payor shall discharge, discipline, refuse to hire or otherwise penalize an obligor because of the duty to withhold income. Where a payor willfully fails to withhold or pay over income pursuant to a properly served income withholding notice, or willfully discharges, disciplines, refuses to hire or otherwise penalizes an obligor, or otherwise fails to comply with any duties imposed by the Income Withholding for Support Act, the obligee, public office or obligor, as appropriate, may file a complaint with the court against the payor. Upon a finding in favor of the complaining party, the court shall enter judgment and direct the enforcement thereof for the total amount that the payor willfully failed to withhold or pay over; and may order employment or reinstatement of or restitution to the obligor, or both, where the obligor has been discharged, disciplined, denied employment or otherwise penalized by the payor and may impose a fine upon the payor not to exceed \$200.
- 4) If an obligee who is receiving income withholding payments under the Income Withholding for Support Act does not receive a payment required under the income withholding notice, he or she must give written notice of the non-receipt to the payor. The notice must

112114

97 /9 #

Ε

D

2

٥

CO1055196

135769925

129066953

2007D0080461

HFS 3683 (R-12-12) (SEQ: 1675B) ILLINOIS SUPPLEMENT TO THE INCOME WITHHOLDING ORDER FOR SUPPORT (IWO), OMB 0970-0154

include the date on which the obligee believes the payment was to have been made and the amount of the payment. The obligee must send the notice to the payor by certified mail, return receipt requested. After receiving a written notice of non-receipt of payment under section 45(j) of the Income Withholding for Support Act, a payor must, within 14 days thereafter, either (i) notify the obligee of the reason for the non-receipt of payment or (ii) make the required payment, together with interest at the rate of 8% calculated from the date on which the payment of income should have been made. A payor who fails to comply with section 45(j) of the Income Withholding for Support Act is subject to the \$100 per day penalty provided pursuant to subsection (a) of Section 35 of the Income Withholding for Support Act.

Rights, Remedies and Duties of the Obligor Under Illinois Law:

- 1) An employer cannot discharge, discipline, refuse to hire, or otherwise penalize the obligor because of the duty to withhold. If the employer does so, the employer may be ordered to reinstate or provide restitution to the obligor, or both, and may be fined up to \$200, pursuant to a complaint filed by the obligor in the circuit court. The obligor is required by law to notify the Department/Clerk of the Circuit Court of any new address or employer within 7 days of the change. At any time after the initial service of the income withholding notice, the Department may serve any employer with the same income withholding notice without further notice to the obligor. New service of an income withholding notice is not required in order to resume withholding of income in the case of an obligor with respect to whom an income withholding notice was previously served on the payor if withholding of income was terminated becase of an interruption in the obligor's employment of less than 180 days.
- 2) If any unpaid arrearage or delinquency equal to at least one month's support obligation exists on the termination date stated in the order for support or, if there is no termination date stated in the order, on the date the child attains the age of majority or is otherwise emancipated, then the periodic amount required to be paid for current support of that child immediately prior to that date shall automatically continue to be an obligation, not as current support but as periodic payment toward satisfaction of the unpaid arrearage or delinquency. That periodic payment shall be in addition to any periodic payment previously required for satisfaction of the arrearage or delinquency. The total periodic amount to be paid toward satisfaction of the arrearage or delinquency may be enforced and collected by any method provided by law for the enforcement and collection of child support, including but not limited to income withholding under the Income Withholding for Support Act.
- 3) The obligor may contest initiated income withholding under Section 30 of the Income Withholding for Support Act, or the obligor may contest income withholding after accrual of delinquency under Section 25 of the Act, by filing a petition to contest withholding with the Clerk of the Circuit Court if the order was issued by the court, or petitioning the Department if the order for support was issued administratively by the Department. The obligor must file the petition within 20 days after service of a copy of the income withholding notice. However, as required by law, the grounds for the request to contest the initiated income withholding shall be limited to whether the parties' written agreement providing an alternative arrangement to immediate withholding continues to ensure payment of support, or misidentification of the obligor. As required by law, the grounds for the petition to contest withholding after accrual of delinquency shall be limited to a dispute concerning the existence or amount of the delinquency, or misidentification of the obligor. The obligor may, at any time, file with the Circuit Clerk or Department a petition to correct a term contained in an income withholding notice to conform to the terms stated in the underlying order for support for the amount of current support, the amount of the arrearage, the periodic amount for payment of the arrearage, or the periodic amount for payment of the delinquency, or to modify, suspend or terminate the income withholding notice because of a modification, suspension or termination of the underlying order for support; or, suspend the income withholding because of inability to deliver income withheld to the obligee due to the obligee's failure to provide a mailing address or other means of delivery. Any obligee, public office or obligor who willfully initiates a false proceeding under the Income Withholding for Support Act may be punished as in cases of contempt of court.

112114

G

Е

D

2

۵

2

O

CO1055196

135769925

123066953

2007D0080461

HFS 3683 (R-12-12) (SEQ: 1676F)

9Z /Z # Z194;00;4740;

IL Dept of Healthcare and Family Services

ROSE HARDING	135769925	Order No.	200700080461
Obligee/Custodial Parent	RIN	<u> </u>	
Vs.			
SIMEON W. AMEN RA	123066953	IV-D No.	C01055196
Obligor/Non-Custodial Parent	RIN		
PROOF OF THE BY	VICE OF JUD!	PORT	
Copies of the attached Income Withholdi JUNE 05, 2014 have been delivered	ing for Suppo ed to BNSF F	ort prepared in RAILWAY COMPANY	the above case on, payor at
	igor at		and
			; by:
Ordinary mail			
Certified mail, return recei	ipt requested	l	
Facsimile transmission or ot	ther electror	nic means	
Personal delivery			
Other method provided by law	for service	of a summons	
Service was made on the day o	JUNE, 201	4	
CER	RTIFICATION		
Under penalties as provided by law purs Procedure, the undersigned certifies th are true and correct, except as to matt and as to such matters the undersigned the same to be true.	at the state ers therein	ments set forth in stated to be on in	this form HFS 2584 formation and belief
	Divisio	n of Child Support	Services
	By:	SHONTE LITTLE	
		CUSTOMER SERVICE	
		PO BOX 641097	
		CHICAGO IL 60664	·1097

HFS 2584 (R-7-10) (SEQ: 1625F)

http://www.ChildSupportIllinois.com

1L478-1238

М Α G E D

2 Q

6

IL Dept of Healthcare and Family Services Division of Child Support Services

INCOME WITHHOLDING FOR SUPPORT

☐ ORIG	INAL INCOME WITHHOLD	ING ORDER/N	DTICE FOR SU	PPORT (IWO)		
X AMENI	DED IWO					
ONE-	TIME ORDER/NOTICE FO	R LUMP SUM	PAYMENT			
TERM:	INATION OF IWO			Date: <u>JUNE</u>	05, 2014	
X Child Supp	oort Enforcement (CS)	E) Agency	Court	Attorney	,	
Private I	ndividual/Entity (Che	eck One)		_		
and return 1t to the http://www.acf.hhs	ust be regular on it: the sender (see IWO s.gov/programs/cse/fo sone other than a Sta ached.	instruction: orms/OMB-09'	5 70-0154 inst	ructions.pdf).	If you receive	this
State/Tribe/Terri	tory <u>State of IL</u> /Tribe <u>COOK</u>		Remittance	Identifier (incl	ude w/payment)	
Private Individua	/Tribe <u>cook</u> I/Entity		Order Ident	ifier <u>2007D0080</u>		
			CSE Agency	Case Identifier	CO1055196	
BNSF RAILWAY COMPA	NY Vithholder's Name	RE: AMEN	RA, SIMEON	w. r's Name (Last.	Files MT	
<u>PO_BOX 1738</u>						
TOPEKA KS 66601-	Vithholder's Address 1738	HARD:	ING, ROSE	r's Social Secur	-	
		Cus	todial Party	/Obligee's Name	(Last, First,	MI)
Employer/Income V	vithholder's FEIN			Entry	Date of Order ort 08/13/2007	for
ORDER INFORMATION: (State/Tribe). Yountil further noti	T-MO current chi	pased on the aw to deduct	these amou	withholding ord	loyee/obligor/:	e focome
\$ per	current cas past-due cs current spo past-due sp	sh medical s ash medical busal suppor bousal suppor	support support rt ort			
	to Withhold of \$ 42		per T-MO			
AMOUNTS TO WITHHOL	.D: You do not have your pay cycle does n	to vary you	ur pay cycle ne ordered pa	syment cycle, wi	thhold one of	the
\$ <u>387.69</u> per	weekly pay period bi-weekly pay period SUM PAYMENT. Do not	(every two) weeks)	semimonthly pa \$ \$40.00 unless you rece	per monthly pa	sy period.
(State/Tribe), you after the date of withhold the full 65 % of disposab is not Illinois (S employer fees at	TION: If the employ must begin withhold 06/05/2014. Send pa amount of support fole income for all or tate/Tribe), otbain http://www.acf.hhs.obligor's principal p	ding no late syment withing any or all ders. If the withholding	or than the in 7 working 1 orders for the employee, 1 imitations (cse/newhire	inst pay period days of the pay this employee/obligor's prince, time requirements.	that occurs 14 date. If you obligor, withho ipal place of 4 ents, and any 2	4 days cannot old up to employment allowable
060514	CO1055196	135769925	•	23066953	2007000804	461
Document Tracking HFS 3683 (R-12-12) (SEQ: 1622F)					ОМВ	0970-0154

М

G E D

0

6

0

97 /6 # ∠19t t29 ∠17; (W∀∠t:60:t)-60-71

For electronic payment requirements and centralized payment collection and disbursement facility information (State Disbursement Unit (SDU)), see http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contact_map.htm.

Include the Remittance Identifier with the payment and if necessary this FIPS Code: 1703100/2007D0080461

Remit payment to: State Disbursement Unit	(SDU/Tribal Order Payee)
at P.O. Sox 5400 Carol Stream IL 60197-5400	(SDU/Tribal Payee Address)
Return to Sender (Completed by Employer/Income Withholder). Paym in accordance with 42 USC 666(b)(5) and (b)(6) or Tribal Payee (sepayment is not directed to an SDU/Tribal Payee or this IWO is not check this box and return the IWO to the sender.	ee Payments to SDU below). If
Signature of Judge/Issuing Official (if required by State or Tribal 1: Print Name of Judge/Issuing Official: Healthcare and Family Services Title of Judge/Issuing Official: Division of Child Support Services Date of Signature:	aw):
If the ampleyee/obliger yeaks in a fract on few a Tribe that is size.	~

If the employee/obligor works in a State or for a Tribe that is different from the State or Tribe that issued this order, a copy of this IWO must be provided to the employee/obligor.

If checked, the employer/income withholder must provide a copy of this form to the employee/obligor.

ADDITIONAL INFORMATION FOR EMPLOYERS/INCOME WITHHOLDERS

State-specific contact and withholding information can be found on the Federal Employer Services website located at:

http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contacts_map.htm

Priority: Withholding for support has priority over any other legal process under State law against the same income (USC 42 666(b)(7)). If a Federal tax levy is in effect, please notify the sender.

Combining Payments: When remitting payments to an SDU or Tribal CSE agency, you may combine withheld amounts from more than one employee/obligor's income in a single payment. You must. however, separately identify each employee/obligor's portion of the payment.

Payments to SDU: You must send child support payments payable by income withholding to the appropriate SDU or to a Tribal CSE agency. If this IWO instructs you to send a payment to an entity other than an SDU (e.g., payable to the custodial party, court, or attorney), you must check the box above and return this notice to the sender. Exception: If this IWO was sent by a Court, Attorney or Private Individual/Entity and the initial order was entered before January 1, 1994 or the order was issued by a Tribal CSE agency, you must follow the "Remit payment to" instructions on this form.

Reporting the Pay Date: You must report the pay date when sending the payment. The pay date is the date on which the amount was withheld from the employee/obligor's wages. You must comply with the law of the State (or Tribal law if applicable) of the employee/obligor's principal place of employment regarding time periods within which you must implement the withholding and forward the support payments.

Multiple IWOs: If there is more than one IWO against this employee/obligor and you are unable to fully honor all IWOs due to Federal, State, or Tribal withholding limits, you must honor all IWOs to the greatest extent possible, giving priority to current support before payment of any past-due support. Follow the State or Tribal law/procedure of the employee/obligor's principal place of employment to determine the appropriate allocation method.

Lump Sum Payments: You may be required to notify a State or Tribal CSE agency of upcoming lump sum payments to this employee/obligor such as bonuses, commissions, or severance pay. Contact the sender to determine if you are required to report and/or withhold lump sum payments.

Liability: If you have any doubts about the validity of this IWO, contact the sender. If you fail to withhold income from the employee/obligor's income as the IWO directs, you are liable for both the accumulated amount you should have withheld and any penalties set by State or Tribal law/ procedure. See attached supplemental sheet for details regarding: "Duties of, and fines and Penalties Applicable to, the Payor Under Illinois Law."

Anti-discrimination: You are subject to a fine determined under State or Tribal law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against an employee/obligor because of this IWO. See attached supplemental sheet for details regarding: "Rights, Remedies and Duties of the Obligor Under Illinois Law."

OMB Expiration Date - 05/31/2014. The OMB Expiration Date has no bearing on the termination date of

the IWO; it identifies the version of the form currently in use.

123066953

2007D0080461

135769925

HFS 3683 (R-12-12) (SEQ: 1622B)

CO1055196

060514

#

#

#

М

Α

G

F

D

2 0

1 4

0

0

97 /OL # Z194 479 Z17; :MA74:80;41-80-21

Em	oloyer's Name: <u>BNSF RAIL</u>	WAY COMPANY	Emp.) ov to	- FETN.
				r FEIN:
	oloyee/Obligor's Name: <u> </u>			
CS	E Agency Case Identifier	CO1055196	Order Identifier: <u>17</u>	03100/2007D0080461
Federal Constate or Tr Disposable local taxes limit is 50 disposable 5% - to 55% you may dedi	income is the net income , Social Security taxes, % of the disposable incom income if the obligor is	ct (CCPA) (15 U, or's principal pleft after makin statutory pensice if the obligon not supporting as are greater thative costs. The	S.C. 1673(b)); or 2) the lace of employment (see a mandatory deductions on contributions and Med is supporting another nother family. However in 12 weeks. If permitt	e amounts allowed by the REMITTANCE INFORMATION). such as: State, Federal, icare taxes. The Federal family and 60% of the those limits increase ad by the State or Tribe.
Tribe. For than the le	orders, you may not withh Tribal employers/income seer of the limit set by is located or the maximum	withholders who the law of the i	receive a State IWO, yourisdiction in which th	u may not withhold more e emblover/income
Depending up health care	oon applicable State or T premiums in determining	ribal law, you m disposable incom	ay need to also conside e and applying appropri	r the amounts paid for ate withholding limits.
Arrears greater than	ater than 12 weeks? If t n 12 weeks, then the Empl	he Order Informa oyer should calc	tion does not indicate ulate the CCPA limit us	that the arrears are ing the lower percentage.
Additional :	(nformation:			
you or you a	OF EMPLOYMENT TERMINATI are no longer withholding SE agency and/or the sen below:	income for this	emplovee/obligor, an e	mölöver must promptly
This pe	erson has never worked fo	r this employer	nor received periodic i	ncome.
This pe	arson no longer works for	this employer n	or receives periodic in	come.
Please provi	de the following informa	tion for the emp	loyee/obligor:	
Termination	date:	_ Last known	phone number:	
Last known a	iddress:			
Final paymer	nt date to SDU/Tribal Pay	ee:	Final payment am	ount:
New employer	's name:			
CONTACT INFO	RMATION:			
(issuer name	Income Withholder: If y b) by phone at (312) 803 website at: www.ChildSup	<u>-7253. Toll Free</u>	<u>: 1-888-245-1938</u> , by fi	me Withholding Unit ax at (888) 227-0370
IL Dept of	tion/income status notic Healthcare and Family Se 197 Chicago IL 60664-10	rvices Division		ces (Issuer address).
To Employee/	Obligor: If the employed by phone at _(312) 803 site at _www.ChildSuppor	e/obligor has qu -7253. Toll Free	estions, contact the Inc : 1-888-245-1938 , by fa	come Withholding Unit
IMPORTANT:	The person completing the employee/obligor.	is form is advis	ed that the information	may be shared with the
060514	CO1055196	135769925	123066953	200700080461

HFS 3683 (R-12-12) (SEQ: 1623F)

#

#

М

Α

Ģ Ε D

2

0

0 6

- 1) The payor shall deduct the amount designated in the income withholding notice, as supplemented by any notice provided pursuant to section 45(f) of the Income Withholding for Support Act, beginning no later than the next payment of income which is payable or creditable to the obligor that occurs 14 days following the date the income withholding notice was mailed, sent by facsimile or other electronic means, or placed for personal delivery to or service on the payor. The payor may combine all amounts withheld for the benefit of an obligee or public office into a single payment and transmit the payment with a listing of obligors from whom withholding has been effected. The payor must pay the amount withhold to the State Disbursement Unit within 7 busines days after the date the benefit of an obliges or public office into a single payment and transmit the payment with a listing of obligors from whom withholding has been effected. The payor must pay the amount withheld to the State Disbursement Unit within 7 busines days after the date the amount would (but for the duty to withhold income) have been paid or credited to the obligor. If the payor knowingly fails to withhold the amount designated in the Income Withholding Notice or to pay the amount would have been paid or credited to the obligor, the payor shall pay a penalty of \$100 for each day that the amount designated in the income withholding notice (whether or not withhold by the payor) is not paid to the State Disbursement Unit after the period of 7 business days has expired. The total penalty for a payor's failure, on one occasion, to withhold or pay to the State Disbursement Unit an amount designated in the income withholding notice may not exceed \$10,000. This penalty may be collected in a civil action which may be brought against the payor in favor of the obliges or public office. An action to collect the penalty may not be brought more than one year after the date of the payor's alleged failure to withhold or pay income. For each withholding, the payor shall provide the State Disbursement Unit, at the time of transmittal, with the date the amount would (but for the duty to withhold income) have been paid or credited to the obligor. For withholding of income, the payor shall be entitled to receive a fee not to exceed \$5 per month to be taken from the income to be paid to the obligor. Whenever the obligor is no longer receiving income from the payor, the payor shall return a copy of the income withholding of income from the payor, the payor shall return a copy of the income withholding notice to the obligee or public office and shall provide information for the purpose of enforcing the Income Withholding for Support Act. Withholding of income shall be made without regard to any prior or subsequent garnishments, attachments, wag subsequent garnishments, attachments, wage assignments, or any other claims of creditors. The income withholding notice is binding upon the payor until service on the payor of an order of the court or notice from either the Department or Clerk of the Circuit Court to cease the withholding.
- If any unpaid arrearage or delinquency equal to at least one month's support obligation exists on the termination date stated in the order for support or, if there is no termination date stated in the order, on the date the child attains the age of majority or is otherwise emancipated, then the periodic amount required to be paid for current support of that child immediately prior to that date shall automatically continue to be an obligation, not as current support but as periodic payment toward satisfaction of the unpaid arrearage or delinquency. That periodic payment shall be in addition to any periodic payment previously required for satisfaction of the arrearage or delinquency. The total periodic amount to be paid toward satisfaction of the arrearage or delinquency may be enforced and collected by any method provided by law for the enforcement and collection of child support, including but not limited to income withholding under the Income Withholding for Support Act.
- 3) Income available for withholding shall be applied first to the current support obligation, then to any premium required for employer, labor union, or trade union related health insurance coverage ordered under the order for support, and then to payments required on past-due support obligations. If there is insufficient available income remaining to pay the full amount of the required health insurance premium after withholding of income for the current support obligation, then the remaining available income shall be applied to payments required on past-dum support obligations. If the payor has been served with more than one income withholding notice pertaining to the same obligor, the payor shall allocate income available for withholding on a proportionate share basis, giving priority to current support payments. No payor shall discharge, discipline, refuse to hire or otherwise penalize an obligor because of the duty to withhold income. Where a payor willfully fails to withhold or pay over income pursuant to a properly served income withholding notice, or willfully discharges, disciplines, refuses to hire or otherwise penalizes an obligor, or otherwise fails to comply with any duties imposed by the Income Withholding for Support Act, the obligee, public office or obligor, as appropriate, may file a complaint with the court against the payor. Upon a finding in favor of the complaining party, the court shall enter judgment and direct the enforcement thereof for the total amount that the payor willfully failed to withhold or pay over; and may order employment or reinstatement of or restitution to the obligor, or both, where the obligor has been discharged, disciplined, denied employment or otherwise penalized by the payor and may impose a fine upon the payor not to exceed \$200.
- 4) If an obligee who is receiving income withholding payments under the Income Withholding for Support Act does not receive a payment required under the income Withholding notice, he or she must give written notice of the non-receipt to the payor. The notice must

CO1055196 060514

135769925 123066953 200700080461

HFS 3683 (R-12-12) (SEQ: 1623B)

#

М

G

Ę

D

2

0

٥

include the date on which the obligee believes the payment was to have been made and the amount of the payment. The obligee must send the notice to the payor by certified mail, return receipt requested. After receiving a written notice of non-receipt of payment under section 45(j) of the Income Withholding for Support Act, a payor must, within 14 days thereafter, either (i) notify the obligee of the reason for the non-receipt of payment or (ii) make the required payment, together with interest at the rate of 9% calculated from the date on which the payment of income should have been made. A payor who fails to comply with section 45(j) of the Income Withholding for Support Act is subject to the \$100 per day penalty provided pursuant to subsection (a) of Section 35 of the Income Withholding for Support Act.

Rights, Remedies and Duties of the Obligor Under Illinois Law:

- 1) An employer cannot discharge, discipline, refuse to hire, or otherwise penalize the obligor because of the duty to withhold. If the employer does so, the employer may be ordered to reinstate or provide restitution to the obligor, or both, and may be fined up to \$200, pursuant to a complaint filed by the obligor in the circuit court. The obligor is required by law to notify the Department/Clerk of the Circuit Court of any new address or employer within 7 days of the change. At any time after the initial service of the income withholding notice, the Department may serve any employer with the same income withholding notice without further notice to the obligor. New service of an income withholding notice is not required in order to resume withholding of income in the case of an obligor with respect to whom an income withholding notice was previously served on the payor if withholding of income was terminated becase of an interruption in the obligor's employment of less than 180 days.
- 2) If any unpaid arrearage or delinquency equal to at least one month's support obligation exists on the termination date stated in the order for support or, if there is no termination date stated in the order, on the date the child attains the age of majority or is otherwise emancipated, then the periodic amount required to be paid for current support of that child immediately prior to that date shall automatically continue to be an obligation, not as current support but as periodic payment toward satisfaction of the unpaid arrearage or delinquency. That periodic payment shall be in addition to any periodic payment previously required for satisfaction of the arrearage or delinquency. The total periodic amount to be paid toward satisfaction of the arrearage or delinquency may be enforced and collected by any method provided by law for the enforcement and collection of child support, including but not limited to income withholding under the Income Withholding for Support Act.
- 3) The obligor may contest initiated income withholding under Section 30 of the Income Withholding for Support Act, or the obligor may contest income withholding after accrual of delinquency under Section 25 of the Act, by filing a patition to contest withholding with the Clerk of the Circuit Court if the order was issued by the court, or petitioning the Department if the order for support was issued administratively by the Department. The obligor must file the petition within 20 days after service of a copy of the income withholding notice. However, as required by law, the grounds for the request to contest the initiated income withholding shall be limited to whether the parties' written agreement providing an alternative arrangement to immediate withholding continues to ensure payment of support, or misidentification of the obligor. As required by law, the grounds for the petition to contest withholding after accrual of delinquency shall be limited to a dispute concerning the existence or amount of the delinquency, or misidentification of the obligor. The obligor may, at any time, file with the Circuit Clerk or Department a petition to correct a term contained in an income withholding notice to conform to the terms stated in the underlying order for support for the amount of current support, the amount of the arrearage, the periodic amount for payment of the arrearage, or the periodic amount for payment of the delinquency, or to modify, suspend or terminate the income withholding notice because of a modification, suspension or termination of the underlying order for support; or, suspend the income withholding because of inability to deliver income withheld to the obligee due to the obligee's failure to provide a mailing address or other means of delivery. Any obligee, public office or obligor who willfully initiates a false proceeding under the Income Withholding for Support Act may be punished as in cases of contempt of court.

060514

#

G

Ε

D

2

0

0

6

0

4

CO1055196

135769925

123066953

200700080461

HFS 3683 (R-12-12) (SEQ: 1624F)

92 \81 # \7194;09:474:00:41=481

IL Dept of Healthcare and Family Services

ROSE HARDING 135769925 Obligee/Custodial Parent RIN vs. SIMEON W. AMEN RA 123066953 IV-D No. C01055196 PROOF OF SERVICE OF JUDICIAL INCOME WITHHOLDING FOR SUPPORT Copies of the attached income Withholding for Support APRIL 17, 2014 have been delivered to BNSF RAILWAY COMPANY , payor at TOPERA KS 66601-1738 and , obligor at ; by: A Ordinary mail Certified mail, return receipt requested Facsimile transmission or other electronic means Personal delivery Other method provided by law for service of a summons Service was made on the 17TH day of APRIL, 2014 CERTIFICATION Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this form HFS 2584					
VS. SIMEON W. AMEN RA Deligor/Non-Custodial Parent RIN PROOF OF SERVICE OF JUDICIAL INCOME WITHHOLDING FOR SUPPORT Copies of the attached Income Withholding for Support prepared in the above case on APRIL 17, 2014 have been delivered to BNSF RAILWAY COMPANY payor at TOPERA KS 66601-1738 and payor at growth propert properties and payor at growth payor at	-			Order No	D0080461
SIMEON W. AMEN RA Obligor/Non-Custodial Parent RIN PROOF OF SERVICE OF JUDICIAL INCOME WITHHOLDING FOR SUPPORT Copies of the attached Income Withholding for Support prepared in the above case on APRIL 17, 2014 have been delivered to BNSF RAILWAY COMPANY payor at TOPEKA KS 66601-1738 and the company payor at the company		_	13.114		
Obligor/Non-Custodial Parent RIN PROOF OF SERVICE OF JUDICIAL INCOME WITHHOLDING FOR SUPPORT Copies of the attached Income Withholding for Support prepared in the above case on APRIL 17, 2014 have been delivered to BNSF RAILWAY COMPANY payor at TOPEKA KS 66601-1738 and pobligor at the above case on APRIL 17, 2014 have been delivered to BNSF RAILWAY COMPANY payor at topeka KS 66601-1738 and provided mail, return receipt requested facsimile transmission or other electronic means Personal delivery Other method provided by law for service of a summons Service was made on the 17TH day of APRIL, 2014 CERTIFICATION Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil					
PROOF OF SERVICE OF JUBICIAL INCOME WITHHOLDING FOR SUPPORT Copies of the attached Income Withholding for Support prepared in the above case on APRIL 17, 2014 have been delivered to BNSF RAILWAY COMPANY payor at TOPEKA KS 66601-1738 and payor at property prepared in the above case on APRIL 17, 2014 payor at	_			IV-D NoCO10:	55196
Copies of the attached Income Withholding for Support APRIL 17, 2014 have been delivered to BNSF RAILWAY COMPANY payor at TOPENA KS 66601-1738 and		obligor/Non-custodial Parent	KIN		
TOPERA KS 66601-1738 and		PROOF OF SERVINCOME WITHHOL	ICE OF JUDI	CIAL Port	
TOPERA RS 66601-1738	APRIL 17	f the attached Income Withholdi 7, 2014 have been delivered	ng for Suppo d to <u>BNSF</u> R	rt prepared in the a AILWAY COMPANY	above case on payor at
Certified mail, return receipt requested Facsimile transmission or other electronic means Personal delivery Other method provided by law for service of a summons Service was made on the 17TH day of APRIL, 2014 CERTIFICATION Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil		KS 66601-1738			and
Certified mail, return receipt requested Facsimile transmission or other electronic means Personal delivery Other method provided by law for service of a summons Service was made on the 17TH day of APRIL, 2014 CERTIFICATION Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil		, obli	gor at		* bv-
Certified mail, return receipt requested Facsimile transmission or other electronic means Personal delivery Other method provided by law for service of a summons Service was made on the 17TH day of APRIL, 2014 CERTIFICATION Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil			,		_, ~,.
Facsimile transmission or other electronic means Personal delivery Other method provided by law for service of a summons Service was made on the 17TH day of APRIL, 2014 CERTIFICATION Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil	_^	Ordinary mail			
Personal delivery Other method provided by law for service of a summons Service was made on the 17TH day of APRIL, 2014 CERTIFICATION Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil		Certified mail, return recei	pt requested		
Other method provided by law for service of a summons Service was made on the 17TH day of APRIL, 2014 CERTIFICATION Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil		Facsimile transmission or ot	her electron	ic means	
Service was made on the 17TH day of APRIL, 2014 CERTIFICATION Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil		Personal delivery			
CERTIFICATION Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil		Other method provided by law	for service	of a summons	
Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil	Service v	was made on the 17TH day o	f APRIL, 20	14	
Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil		CER	TIFICATION		
are true and correct, except as to matters therein stated to be on information and belief and as to such matters the undersigned certifies as aforesaid that he/she verily believes the same to be true.	Procedure are true and as to	e, the undersigned certifies the and correct, except as to matte such matters the undersigned of	at the state ers therein	ments set forth in this stated to be on informat	form HFS 2584 tion and belief
Division of Child Support Services			Divisio	n of Child Support Servi	ices
SHONTE LITTLE			By:	SHONTE LITTLE	
By: SHORTE ETTTE				CUSTOMER SERVICE	
			•	PO BOX 641097	
				PO BOX 641097	
CUSTOMER SERVICE				•	

HFS 2584 (R-7~10) (SEQ: 1537F)

http://www.ChildSupportIllinois.com

CHICAGO IL 60664-1097

1L478-1238

١ M Α G E D

2 0 1

0

7

IL Dept of Healthcare and Family Services Division of Child Support Services

INCOME WITHHOLDING FOR SUPPORT

ORIGINAL INCOME WITHHOLDING OF	RDER/NOTICE FOR SL	IPPORT (IWO)	
X AMENDED IWD			
ONE-TIME ORDER/NOTICE FOR LUMP	SUM PAYMENT		
TERMINATION OF IWO		Date: <u>JUNE 16</u>	2014
X Child Support Enforcement (CSE) Age	ency Court	Attorney	
Private Individual/Entity (Check Or	ne)		
NOTE: This IWO must be regular on its face and return it to the sender (see IWO instructed)://www.acf.hhs.gov/programs/cse/forms/Cdocument from someone other than a State or order must be attached,	actions DMB-0970-0154 inst	ructions.pdf). If	vou receive this
State/Tribe/Territory State of IL City/County/Dist./Tribe COOK Private Individual/Entity	Order Ident	1f1er 2007D008046	0/2007D0080461
	CSE Agency	Case Identifier Co	01055196
Employer/Income Withholder's Name	AMEN RA, SIMEON Employee/Obligo	W. or's Name (Last, Fir	et. MI)
PD BOX 1738 Employer/Income Withholder's Address		or's Social Security	
TOPEKA KS 66601-1738	HARDING, ROSE	/Obligee's Name (La	
		, 	way that may
Child(ren)'s Name(s) (Last, First, MI) Chi	lid(ren)'s Birth D	ate(s)	09/13/2007
ORDER INFORMATION: This document is based (State/Tribe). You are required by law to until further notice. \$ 300.00 per T-MD current child su past-due child su per current cash med past-due spousal past-due spousal past-due spousal past-due spousal per other (must spec	deduct these amous support support - Arrears sical support sidical support support support	nts from the employ	ee/obligor's income
for a Total Amount to Withhold of \$ 420.00	per T-MO		
AMOUNTS TO WITHHOLD: You do not have to va Information. If your pay cycle does not ma following amounts:			
\$ 193.85 per weekly pay period \$ 387.69 per bi-weekly pay period (eve	ry two weeks)	\$ <u>840.00</u> pe	eriod (twice a month) r monthly pay period, a a termination order.
REMITTANCE INFORMATION: If the employee/ob (State/Tribe), you must begin withholding nafter the date of O6/16/2014. Send payment withhold the full amount of support for any 65 % of disposable income for all orders, is not Illinois (State/Tribe), otbain withh employer fees at http://www.acf.bhs.gov/prfor the employee/obligor's principal place	to later than the within 7 working or all orders for If the employee colding limitation ograms/cse/newhir	first pay period the days of the pay day r this employee/obl /obligor's principa s. time requirement	at occurs 14 days te. If you cannot igor, withhold up to 1 place of employment s, and any allowable
O61614 CO1055196 1357	69925	123066953	2007D0080461
Document Tracking Identifier HFS 3683 (R-12-12) (SEC: 1576F)			OMB 0970-0154

М

G E D

2 0

0

1

97 /91 #

For electronic payment requirements and centralized payment collection and disbursement facility information (State Disbursement Unit (SDU)), see http://www.acf.hhs.gov/programs/cse/newhire/emplover/contacts/contact_map.htm.

Include the Remittance Identifier with the payment and if necessary this FIPS Code: 1703100/200700080461

Remit payment to: State Disbursement Unit	(SDU/Tribal Order Payee)
at P.O. Box 5400 Carol Stream IL 60197-5400	(SDU/Tribal Payee Address)
Return to Sender (Completed by Employer/Income Withholder). Pay in accordance with 42 USC 666(b)(5) and (b)(6) or Tribal Payee (payment is not directed to an SDU/Tribal Payee or this IWO is no check this box and return the IWO to the sender.	see Payments to SDU below). If
Signature of Judge/Issuing Official (if required by State or Tribal	law):
Print Name of Judge/Issuing Official: Healthcare and Family Service	5
Title of Judge/Issuing Official: Division of Child Support Services	'
Date of Signature:	

If the employee/obligor works in a State or for a Tribe that is different from the State or Tribe that issued this order, a copy of this IWD must be provided to the employee/obligor.

If checked, the amployer/income withholder must provide a copy of this form to the employes/obligor.

ADDITIONAL INFORMATION FOR EMPLOYERS/INCOME WITHHOLDERS

State-specific contact and withholding information can be found on the Federal Employer Services website located at:

http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contacts_map.htm

Priority: Withholding for support has priority over any other legal process under State law against the same income (USC 42 666(b)(7)). If a Federal tax levy is in effect, please notify the sender.

Combining Payments: When remitting payments to an SDU or Tribal CSE agency, you may combine withheld amounts from more than one employee/obligor's income in a single payment. You must, however, separately identify each employee/obligor's portion of the payment.

Payments to SDU: You must send child support payments payable by income withholding to the appropriate SDU or to a Tribal CSE agency. If this IWO instructs you to send a payment to an entity other than an SDU (e.g., payable to the custodial party, court, or attorney), you must check the box above and return this notice to the sender. Exception: If this IWO was sent by a Court, Attorney or Private Individual/Entity and the initial order was entered before January 1, 1994 or the order was issued by a Tribal CSE agency, you must follow the "Remit payment to" instructions on this form.

Reporting the Pay Date: You must report the pay date when sending the payment. The pay date is the date on which the amount was withheld from the employee/obligor's wages. You must comply with the law of the State (or Tribal law if applicable) of the employee/obligor's principal place of employment regarding time periods within which you must implement the withholding and forward the support payments.

Multiple IWOs: If there is more than one IWO against this employee/obligor and you are unable to fully honor all IWOs due to Federal. State, or Tribal withholding limits, you must honor all IWOs to the greatest extent possible, giving priority to current support before payment of any past-due support. Follow the State or Tribal law/procedure of the employee/obligor's principal place of employment to determine the appropriate allocation method.

Lump Sum Payments: You may be required to notify a State or Tribal CSE agency of upcoming lump sum payments to this employee/obligor such as bonuses, commissions, or severance pay. Contact the sender to determine if you are required to report and/or withhold lump sum payments.

Liability: If you have any doubts about the validity of this IWO, contact the sender. If you fail to withhold income from the employee/obligor's income as the IWO directs, you are liable for both the accumulated amount you should have withheld and any penalties set by State or Tribal Taw/ procedure. See attached supplemental sheet for details regarding: "Duties of, and Fines and Penalties Applicable to, the Payor Under Illinois Law."

Anti-discrimination: You are subject to a fine determined under State or Tribal law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against an employee/obligor because of this IWO. See attached supplemental sheet for details regarding: "Rights, Remedies and Duties of the Obligor Under Illinois Law."

OMB Expiration Date - 05/31/2014. The OMB Expiration Date has no bearing on the termination date of the IWO; it identifies the version of the form currently in use.

061614

123066953

200700080461

135769925

HFS 3683 (R-12-12) (SEQ: 1576B)

CO1055196

#

#

#

М

Α

G

Œ

D

2

٥

6

1

97 /91 # Z19t t79 Z17: :MA74:80;41-80-21

	Employer's Name: BNSF RAI	LWAY COMPANY	Em	ployer FEIN:	41-6034000	
Employee/Obligon's Name: SIMEON W. AMEN RA						
	CSE Agency Case Identifier	CO1055196	Order Identifier	: 1703100/20)7D0080461	
Federal State or Disposab local ta limit is disposab 5% - to you may	ing Limits: You may not wi Consumer Credit Protection Tribe of the employee/obli le income is the net income xes, Social Security taxes, 50% of the disposable inco le income if the obligor is 55% and 65% - if the arrear deduct a fee for administra t indicated in this section	Act (CCPA) (15 U. gor's principal p left after making statutory pension me if the obligor not supporting a s are greater the tive costs. The	S.C. 1673(b)); or object of employmenting mandatory deduct on contributions and its supporting anounther family. Hours 12 weeks. If pain	2) the amount: (see REMITTAI tons such as: d Medicare ta: ther family a wever, those rmitted by the	s allowed by the NCE INFORMATION). State, Federal, des. The Federal and 60% of the limits increase a State or Tribe,	
for Tribal orders, you may not withhold more than the amounts allowed under the law of the issuing Tribe. For Tribal employers/income withholders who receive a State IWO, you may not withhold more than the lesser of the limit set by the law of the jurisdiction in which the employer/income withholder is located or the maximum amount permitted under section 303(d) of the CCPA (15 U.S.C. 1673 (b)).						
Depending upon applicable State or Tribal law, you may need to also consider the amounts paid for health care premiums in determining disposable income and applying appropriate withholding limits.						
Arrears greater than 12 weeks? If the Order Information does not indicate that the arrears are greater than 12 weeks, then the Employer should calculate the CCPA limit using the lower percentage.						
Addition	al Information:					
	10000					
you or you	TION OF EMPLOYMENT TERMINAT ou are no longer withholding ne CSE agency and/or the section below;	g income for this	: employee/obligor,	an employer r	nust promptly	
☐ Thi	s person has never worked fo	or this employer	nor received period	dic income.		
This person no longer works for this employer nor receives periodic income.						
Please provide the following information for the employee/obligor:						
Termination date: Last known phone number:						
Last known address:						
Final pay	/ment date to SDU/Tribal Pa	yee:	Final paymer	nt amount:		
New employer's address:						
CONTACT :	INFORMATION:					
To Employer/Income Withholder: If you have any questions, contact the Income Withholding Unit (issuer name) by phone at <u>(312) 803-7253, Toll Free: 1-888-245-1938</u> , by fax at (888) 227-0370, by email or website at: www.ChildSupportIllingis.com .						
Send termination/income status notice and other correspondence to: IL Dept of Healthcare and Family Services Division of Child Support Services PO Box 641097 Chicago IL 60664-1097 (Issuer address).						
To Employ (Issuer)	/ee/Obligor: If the employename) by phone at <u>(312) 80</u> 0 website at <u>www.ChildSuppo</u>	se/obligor has qu 3-7253, Toll Free	estions, contact th	ne Income With	holding Unit	
IMPORTANT	The person completing the employee/obligor.	nis form is advis	ed that the informa	ation may be s	hared with the	
061614	CO1055196	135769925	123066953	200	7D0080461	

HFS 3683 (R-12-12) (SEQ: 1577F)

ı

М Α

G E D

2

0 1 4

0 6

ILLINDIS SUPPLEMENT TO THE INCOME WITHHOLDING ORDER FOR SUPPORT (IWO), OMB 0970-0154 Duties of, and Fines and Penalties Applicable to, the Payor Under Illinois Law:

- 1) The payor shall deduct the amount designated in the income withholding notice, as supplemented by any notice provided pursuant to section 45(f) of the Income Withholding for Support Act, beginning no later than the next payment of income which is payable or creditable to the obligor that occurs 14 days following the date the income withholding notice was mailed, sent by facsimile or other electronic means, or placed for personal delivery to or service on the payor. The payor may combine all amounts withheld for the benefit of an obligoes from whom withholding has been effected. The payor must pay the amount withheld to the State Disbursement Unit within 7 business days after the date the amount would (but for the duty to withhold income) have been paid or credited to the obligor. If the payor knowingly fails to withhold the amount designated in the Income Withholding Notice or to pay the amount would have been paid or credited to the obligor, the payor shall pay a penalty of \$100 for each day that the amount designated in the Income withholding notice (whether or not withheld by the payor) is not paid to the State Disbursement Unit after the period of 7 business days has expired. The total penalty for a payor's failure, on one occasion, to withhold or pay to the State Disbursement Unit an amount designated in the income withholding notice why not exceed \$10,000. This penalty may be collected in a civil action which may be brought against the payor in favor of the obligee or public office. An action to collect the penalty may not be brought more than one year after the date of the payor's alleged failure to withhold or pay income. For each withholding, the payor shall provide the State Disbursement Unit, at the time of transmittal, with the date the amount would (but for the duty to withhold income) have been paid or credited to the obligor. For withholding of income, the payor shall be entitled to receive a few not to exceed \$5 per month to be taken from the payor shall be entitled to receive a few not one s
 - 2) If any unpaid arrearage or delinquency equal to at least one month's support obligation exists on the termination date stated in the order for support or, if there is no termination date stated in the order, on the date the child attains the age of majority or is otherwise emancipated, then the periodic amount required to be paid for current support of that child immediately prior to that date shall automatically continue to be an obligation, not as current support but as periodic payment toward satisfaction of the unpaid arrearage or delinquency. That periodic payment shall be in addition to any periodic payment previously required for satisfaction of the arrearage or delinquency. The total periodic amount to be paid toward satisfaction of the arrearage or delinquency may be enforced and collected by any method provided by law for the enforcement and collection of child support, including but not limited to income withholding under the Income withholding for Support Act.
- 3) Income available for withholding shall be applied first to the current support obligation, then to any premium required for employer, labor union, or trade union related health insurance coverage ordered under the order for support, and then to payments required on past-due support obligations. If there is insufficient available income remaining to pay the full amount of the required health insurance premium after withholding of income for the current support obligation, then the remaining available income shall be applied to payments required on past-due support obligations. If the payor has been served with more than one income withholding notice pertaining to the same obligor, the payor shall allocate income available for withholding on a proportionate share basis, giving priority to current support payments. No payor shall discharge, discipline, refuse to hire or otherwise penalize an obligor because of the duty to withhold income. Where a payor willfully fails to withhold or pay over income pursuant to a properly served income withholding notice, or willfully discharges, disciplines, refuses to hire or otherwise penalizes an obligor, or otherwise fails to comply with any duties imposed by the Income withholding for Support Act, the obligee, public office or obligor, as appropriate, may file a complaint with the court against the payor. Upon a finding in favor of the complaining party, the court shall enter judgment and direct the enforcement thereof for the total amount that the payor willfully failed to withhold or pay over; and may order employment or reinstatement of or restitution to the obligor, or both, where the obligor has been discharged, disciplined, denied employment or otherwise penalized by the payor and may impose a fine upon the payor not to exceed \$200.
- 4) If an obligee who is receiving income withholding payments under the Income Withholding for Support Act does not receive a payment required under the income withholding notice, he or she must give written notice of the non-receipt to the payor. The notice must

061614

М

G

E

D

2

٥

1

0

Ġ

16

CO1055186

135769925

123066953

200700080461

HFS 3683 (R-12-12) (SEQ: 1577B) ILLINOIS SUPPLEMENT TO THE INCOME WITHHOLDING ORDER FOR SUPPORT (IWO), OMB 0970-0154

include the date on which the obligee believes the payment was to have been made and the amount of the payment. The obligee must send the notice to the payor by certified mail, return receipt requested. After receiving a written notice of non-receipt of payment under section 45(j) of the Income Withholding for Support Act, a payor must, within 14 days thereafter, either (i) notify the obligee of the reason for the non-receipt of payment or (ii) make the required payment, together with interest at the rate of 9% calculated from the date on which the payment of income should have been made. A payor who fails to comply with section 45(j) of the Income Withholding for Support Act (s subject to the \$100 per day penalty provided pursuant to subsection (a) of Section 35 of the Income Withholding for Support Act.

Rights, Remedies and Duties of the Obligor Under Illinois Law:

- 1) An employer cannot discharge, discipline, refuse to hire, or otherwise penalize the obligor because of the duty to withhold. If the employer does so, the employer may be ordered to reinstate or provide restitution to the obligor, or both, and may be fined up to \$200, pursuant to a complaint filed by the obligor in the circuit court. The obligor is required by law to notify the Department/Clerk of the Circuit Court of any new address or employer within 7 days of the change. At any time after the initial service of the income withholding notice, the Department may serve any employer with the same income withholding notice without further notice to the obligor. New service of an income withholding notice is not required in order to resume withholding of income in the case of an obligor with respect to whom an income withholding notice was previously served on the payor if withholding of income was terminated becase of an interruption in the obligor's employment of less than 180 days.
- 2) If any unpaid arrearage or delinquency equal to at least one month's support obligation exists on the termination date stated in the order for support or, if there is no termination date stated in the order, on the date the child attains the age of majority or is otherwise emancipated, then the periodic amount required to be paid for current support of that child immediately prior to that date shall automatically continue to be an obligation, not as current support but as periodic payment toward satisfaction of the unpaid arrearage or delinquency. That periodic payment shall be in addition to any periodic payment previously required for satisfaction of the arrearage or delinquency. The total periodic amount to be paid toward satisfaction of the arrearage or delinquency may be enforced and collected by any method provided by law for the enforcement and collection of child support, including but not limited to income withholding under the Income Withholding for Support Act.
- 3) The obligor may contest initiated income withholding under Section 30 of the Income Withholding for Support Act, or the obligor may contest income withholding after accrual of delinquency under Section 25 of the Act, by filing a petition to contest withholding with the Clerk of the Circuit Court if the order was issued by the court, or petitioning the Department if the order for support was issued administratively by the Department. The obligor must file the petition within 20 days after service of a copy of the income withholding notice. However, as required by law, the grounds for the request to contest the initiated income withholding shall be limited to whether the parties' written agreement providing an alternative arrangement to immediate withholding continues to ensure payment of support, or misidentification of the obligor. As required by law, the grounds for the patition to contest withholding after accrual of delinquency shall be limited to a dispute concerning the existence or amount of the delinquency, or misidentification of the obligor. The obligor may, at any time, file with the Circuit Clerk or Department a petition to correct a term contained in an income withholding notice to conform to the terms stated in the underlying order for support for the amount of current support, the amount of the arrearage, the periodic amount for payment of the arrearage, or the periodic amount for payment of the delinquency, or to modify, suspend or terminate the income withholding notice because of a modification, suspension or termination of the underlying order for support; or, suspend the income withholding because of inability to deliver income withheld to the obligee due to the obligee's failure to provide a mailing address or other means of delivery. Any obligee, public office or obligor who willfully initiates a false proceeding under the Income Withholding for Support Act may be punished as in cases of contempt of court,

O61614 C01055196 135769925 123066953 2007D0080461

HFS 3683 (R-12-12) (SEQ: 1578F)

#

#

М

G

Е

D

2

0

6

1

IL Dept of Healthcare and Family Services

ı	ROSE HARDING	135769925	Order No.	200700080461
- (Obligee/Custodial Parent	RIN		
	Vs.			
	SIMEON W. AMEN RA	123066953	IV-D No.	C01055196
(Obligor/Non-Custodial Parent	RIN		
	PROOF OF SERVI	CE OF JUDI	CIAL OTICE	
Copies of APRIL 16 2500 LUU FORT WOR	MENK DR	Support Not to BURLIN	ice prepared in GTON NORTHERN AND	
SIMEON W	. AMEN RA . oblig	or at 7235	S MICHIGAN AVE #	2 and
CHICAGO	IL 60619-1016			; by:
^	Ordinary mail			
	Certified mail, return receip	t requested		
	Facsimile transmission or oth	er electron	ic means	
	Personal delivery			
	Other method provided by law	for service	of a summons	
Service wa	as made on the 16TH day of	APRIL, 20	14	
	CERT	IFICATION		
Procedure, are true a and as to	alties as provided by law pursu, the undersigned certifies tha and correct, except as to matte such matters the undersigned coto be true.	t the state rs therein :	ments set forth in stated to be on in	this form HFS 2584 formation and belief
		Divisio	n of Child Support	Services
		Ву:	SHONTE LITTLE	
		_	CUSTOMER SERVICE	
			PO BOX 641097	
		-	CHICAGO IL 60664	-1097

HFS 2584 (R-7-10) (SEQ: 1538F)

Μ Α G Ε D

2 0

0

7

97 /07 #

http://www.ChildSupportIllinois.com

JL478-1238

IL Dept of Healthcare and Family Services Division of Child Support Services Medical Support Unit PO Box 641097 Chicago IL 50554-1087

BURLINGTON NORTHERN AND SANTA F 2500 LOU MENK DR FORT WORTH TX 76131-2828

Obligor:

SIMEON W. AMEN RA

Date: APRIL 16, 2014

RIN: 123066953

SSN:

FIPS/Docket: 1703100/2007D0080461

Case Number: C01055196 Obligee:

ROSE HARDING

RIN: 135769925

COMPLETE REVERSE SIDE AND RETURN

М Α

#

G

E D

2 0 1

4 O

1

7

HIPAA PRIVACY

Please be advised that your Plan Administrator must comply with the requirements of the National Medical Support Notice (NMSN) served on you by Healthcare and Family Services (HFS). Your Plan Administrator may claim that the federal Health Insurance Portability and Accountability Act (HIPAA) (Pub. L. 104-191) prohibits the Plan Administrator from disclosing the requested information.

Our Department's Office of General Counsel has stated that HIPAA's privacy rule (45 CFR Part 160 and Part 164 subpart A and E) does NOT prohibit the Plan Administrator from complying with the requirements of the NMSN (HFS 3554) or any other insurance coverage report the Department may provide. Including the Health Insurance Report (HFS 1442A), or enrolling the Obligor's minor children named in the NMSN in your health plan.

The privacy rule permits a covered entity "to use or disclose protected health information to the extent that such use or disclosure is required by law". 45 CFR Section 164,512(a).

Compliance with the requirements of the NMSN, providing requested information to the State child support enforcement agency regarding enrollment of child support obligors' children, is required by State and federal law and regulation, including 42 USC Section 666(a)(19); 29 USC Section 1169(a); 45 CFR Sections 303.30(a)(7), 303.32, 160.103; 29 CFR Section 2590; 750 ILCS Section 5/505.2; and 750 ILCS Section 28/22.

Specifically, Section 505.2 of the Illinois Marriage and Dissolution of Marriage Act states: (f) Disclosure of information. The obligor's employer or labor union or trade union shall disclose to the obligee or Public Office, upon request, information concerning any dependent coverage plans which would be made available to a new employee or labor union member or trade union member. The employer or labor union or trade union shall disclose such information whether or not a court order for medical support has been entered.

750 ILCS 5/505.2(f): and Section 22 of the Income Withholding for Support Act state: (f) The administrator of a health insurance plan to whom an employer has transferred the severable notice to plan administrator part of a National Medical Support Notice shall complete that part with the health insurance coverage information required under the instructions in the Notice and shall return that part to the Title IV-D Agency within 40 business days after the date of the Notice.

Your failure or the failure of your Plan Adminstrator to comply with the requirements of the NMSN may result in the Department filing a complaint against you in court. 750 ILCS 28/50(a).

If you have any questions, you may contact HFS' Income Withholding and Medical Support Unit at 1-888-245-1938

041614

CO1055196

135769925

123066953

2007D0080461

HFS 3570 (R-6-12) (SEO: 6464F)

IL Dept of Healthcare and Family Services Division of Child Support Services

INCOME WITHHOLDING FOR SUPPORT

X ORIG	SINAL INCOME WITHHOLDING	ORDER/NOTICE FOR	SUPPORT (IWO)	
AME	NDED IWO			
ONE-	-TIME ORDER/NOTICE FOR L	.UMP SUM PAYMENT		
TER	MINATION OF IWO		Date: APRIL 1	7, 2014
X Child Sup	oport Enforcement (CSE)	Agency Cour	t 🔲 Attorney	
Private :	Individual/Entity (Check	. One)		
and return it to http://www.acf.ht	must be regular on its f the sender (see IWO ins ns.gov/programs/cse/form meone other than a State tached.	structions ns/QMB-0970-0154 in:	structions.pdf), If	you receive this
State/Tribe/Terr	itory State of IL	Remittance	Identifier (include	w/payment)
Private Individua	itory <u>State of IL</u> ./Tribe <u>COOK</u> al/Entity	Order Ide	<u>1703100</u> htifier <u>2007D008046</u>	0/2007D0080461
		CSE Agenc	y Case Identifier <u>Co</u>	01055196
	PANYR Withholder's Name	Employee/Oblid	V W. gor's Name (Last, Fi	et, MI)
Employer/Income	Withholder's Address -1738	Employee/Oblig HARDING, ROSE	gor's Social Security	/ Number
TOT ENM NO GOOD!	1700		ty/Obligee's Name (L	Ast. First, MI)
ORDER INFORMATION (State/Tribe) until further nor \$ 300.00 per \$ per \$ per \$ per \$ per \$ per \$ per	T-MO current child past-due child current cash past-due cash current spous past-due spoud other (must s	sed on the support of to deduct these amount is support - Arrears medical support is medical support is support it support is suppor	Date(s) Date(s) Date(s) Dr withholding order ounts from the employers greater than 12 week	/ee/obligor's income
for a Total Amou r	nt to Withhold of \$ 300.	00 per <u>T-M0</u>	 ·	
Information. If following amounts	OLD: You do not have to your pay cycle does not s:	match the ordered	payment cycle, with	
\$ 276.92 per	bi-weekly pay period (MP SUM PAYMENT. Do not s	every two weeks)	\$ <u>600.00</u> pa	er monthly pay period.
(State/Tribe), you after the date of withhold the full 65 % of dispose is not Illinois (employer fees at	AATION: If the employees ou must begin withholding 04/17/2014, Send paymed amount of support for able income for all orders (State/Tribe), otbain with http://www.acf.hhs.gov/obligor/s principal pla	ng no later than the lent within 7 working any or all orders to rs. If the employed thholding limitatic (programs/cse/newh	a first pay period thing days of the pay days of the pay days or this employee/ob ee/obligor's principa ons, time requirement	nat occurs 14 days tte. If you cannot ligor, withhold up to al place of employment s, and any allowable
041714	CO1055196 1	35769925	123066953	2007D0080461
Document Tracking HFS 3683 (R-12-12 (SEQ: 1533F)				OMB 0970-0154

97 /77 # ∠19t t29 ∠17; W∀∠t:60:tt-60-21

For electronic payment requirements and centralized payment collection and disbursement facility information (State Disbursement Unit (SDU)), see http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contact_map.htm.

Remit payment to: State Disbursement Unit at P.O. Box 5400 Carol Stream IL 60197-5400	(SDU/Tribal Order Payee) (SDU/Tribal Payee Address)
at 7.6. 568 5400 CANOT SCHOOL 12 60187-5400	(3007 II IDAT PAVAG ACCITESS)
Return to Sender (Completed by Employer/Income Withholder). If in accordance with 42 USC 666(b)(5) and (b)(6) or Tribal Payes payment is not directed to an SDU/Tribal Payes or this IWO is check this box and return the IWO to the sender.	(see Payments to SDU below). If
Signature of Judge/Issuing Official (if required by State or Triba	1 Taw):
Print Name of Judge/Issuing Official: Healthcare and Family Servi	COS
Title of Judge/Issuing Official: Division of Child Support Service	
Date of Signature:	

If the employee/obligor works in a State or for a Tribe that is different from the State or Tribe that issued this order, a copy of this IWO must be provided to the employee/obligor.

If checked, the employer/income withholder must provide a copy of this form to the employee/obligor.

ADDITIONAL INFORMATION FOR EMPLOYERS/INCOME WITHHOLDERS

State-specific contact and withholding information can be found on the Federal Employer Services website located at:

http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contacts_map.htm

Priority: Withholding for support has priority over any other legal process under State law against the same income (USC 42 666(b)(7)). If a Federal tax levy is in effect, please notify the sender.

Combining Payments: When remitting payments to an SDU or Tribal CSE agency, you may combine withheld amounts from more than one employee/obligor's income in a single payment. You must, however, separately identify each employee/obligor's portion of the payment.

Payments to SDU: You must send child support payments payable by income withholding to the appropriate SDU or to a Tribal CSE agency. If this IWO instructs you to send a payment to an entity other than an SDU (e.g., payable to the custodial party, court, or attorney), you must check the box above and return this notice to the sender. Exception: If this IWO was sent by a Court. Attorney or Private Individual/Entity and the initial order was entered before January 1, 1994 or the order was issued by a Tribal CSE agency, you must follow the "Remit payment to" instructions on this form.

Reporting the Pay Date: You must report the pay date when sending the payment. The pay date is the date on which the amount was withheld from the employee/obligor's wages. You must comply with the law of the State (or Tribal law if applicable) of the employee/obligor's principal place of employment regarding time periods within which you must implement the withholding and forward the support payments.

Multiple IWOs: If there is more than one IWO against this employee/obligor and you are unable to fully honor all IWOs due to Federal, State, or Tribal withholding limits, you must honor all IWOs to the greatest extent possible, giving priority to current support before payment of any past-due support. Follow the State or Tribal law/procedure of the employee/obligor's principal place of employment to determine the appropriate allocation method.

Lump Sum Payments: You may be required to notify a State or Tribal CSE agency of upcoming lump sum payments to this employee/obligor such as bonuses, commissions, or severance pay. Contact the sender to determine if you are required to report and/or withhold lump sum payments.

Liability: If you have any doubts about the validity of this IWO, contact the sender. If you fail to withhold income from the employee/obligor's income as the IWO directs, you are liable for both the accumulated amount you should have withheld and any penalties set by State or Tribal law/procedure. See attached supplemental sheet for details regarding: "Duties of, and Fines and Penalties Applicable to, the Payor Under Illinois Law."

Anti-discrimination: You are subject to a fine determined under State or Tribal law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against an employee/obligor because of this IWD. See attached supplemental sheet for details regarding: "Rights, Remedies and Duties of the Obligor Under Illinois Law."

DMB Expiration Date - 05/31/2014. The DMB Expiration Date has no bearing on the termination date of the IWO; it identifies the version of the form currently in use.

HFS 3683 (R-12-12) (SEQ: 1533B)

#

#

#

М

A

G

Ε

D

2

0

1

0

12-09-14;00:47AM; # 23/ 26

Ç:			SIMEON W. AMEN RA		
	SE Agency	Case Identifier	CO1055196	Order Identifier: <u>17</u>	03100/2007D0080461
•					
Federal Con State or Ti Disposable local taxe: limit is 50 disposable 5% - to 55; you may dec	nsumer Cre ribe of th income is s. Social 0% of the income if % and 65% duct a fee	dit Protection / e employee/oblig the net income Security taxes, disposable income the obligor is - if the arrears	Act (CCPA) (15 U. gor's principal p left after makin statutory pension ne if the obligor not supporting a s are greater tha tive costs. The	the lesser of: 1) the a S.C. 1673(b)); or 2) the second of employment (see a grandatory deductions on contributions and Medis supporting another nother family. However in 12 weeks. If permitt combined support amount	e amounts allowed by REMITTANCE INFORMAT such as: State, Fede icare taxes. The Fefamily and 60% of the those limits incresed by the State or T
Tribe. For	r Tribal e esser of t is locate	mployers/income he limit set by	withholders who the law of the i	e amounts allowed under receive a State IWO, yo urisdiction in which th d under section 303(d)	u may not withhold m e emplover/income
Depending (health care	upon appli e premiums	cable State or 1 in determining	Fribal law, you m disposable incom	ay need to also conside e and applying appropri	r the amounts paid f ate withholding limi
Arrears greater the	mater than an 12 week	12 weeks? If to s, then the Empl	the Order Informa loyer should calc	tion does not indicate ulate the CCPA limit us	that the arrears are ing the lower percen
Additional	Informati	on:			
notify the Information	CSE agency n below:	y and/or the ser	nder by returning	employee/obligor, an e this form to the addre	ss listed in the Con
=				or receives periodic in	
Please prov	vide the fo	ollowina informa	ation for the emp	lovee/oblicor:	
		or ton the		-	
	a dato:		lest known	nkona numban:	
Termination				•	
Termination				phone number:	
Termination Last known	address:	,		•	1 1 111
Termination Last known final payme New employe	address: ent date to	o SDU/Tribal Pay	/ee:	Final payment am	1 1 111
Termination Last known final payme New employe	address:ent date to	o SDU/Tribal Pay	/ee;	Final payment am	1 1 111
Termination Last known final payme New employe New employe CONTACT INF To Employer (issuer name	address:	o SDU/Tribal Pay as:	/ee; /ou have any ques	Final payment am Final payment am tions, contact the Inco	ount:
Termination Last known final payme New employe New employe CONTACT INF To Employer (issuer nam by email or Send termin It Dept of	address:	o SDU/Tribal Pay ss: ithholder: If y ne at (312) 803 at: www.ChildSuc ome status notic re and family Se	/ee: /ou have any ques 3-7253, Toll Free portIllinois.com se and other corr prvices Division	Final payment am tions, contact the Inco; 1-888-245-1938, by f	me Withholding Unit ax at (888) 227-0370
Termination Last known final payme New employe New employe CONTACT INF To Employer (issuer nam by email or Send termin It Dept of PO Box 641 To Employee (Issuer nam	address: ant date to ar's name: ar's addres FORMATION: r/Income W ne) by phor website a nation/ince Healthcan 1097 Chic	o SDU/Tribal Pay ss: ithholder: If y ne at (312) 803 at: www.ChildSup ome status notic re and family Se cago IL 60664-10	/ee; /ou have any ques -7253, Toll free portIllinois.com e and other corr prvices Division 97 ee/obligor has que	Final payment am tions, contact the Inco : 1-888-245-1938 , by f	me Withholding Unit ex at (888) 227-0370 es (Issuer addr
Termination Last known final payme New employe New employe CONTACT INF To Employer (issuer nam by email or Send termin It Dept of PO Box 641 To Employee (Issuer nam email or we	address: ant date to ar's name: ar's addres FORMATION: r/Income W me) by phor website a ation/income f Healthcan 1097 Chic a/Obligor: me) by phor absite at The perso	o SDU/Tribal Pay ss: ithholder: If y ne at (312) 803 at: www.ChildSup ome status notic re and Family Se cago IL 60664-10 If the employe ne at (312) 803 www.ChildSuppor	/ee; /ou have any ques -7253, Toll free portIllinois.com e and other corr ervices Division 97 ee/obligor has qu -7253, Toll Free tillinois.com.	Final payment am tions, contact the Inco: 1-888-245-1938, by f. espodence to: of Child Support Servi.	me Withholding Unit ax at (888) 227-0370
Termination Last known final payme New employe New employe CONTACT INF To Employer (issuer nam by email or Send termin It Dept of PO Box 641 To Employee (Issuer nam email or we	address: ent date to er's name: er's addres fORMATION: r/Income W nation/inco f Healthcar 1097 Chit e/Obligor: ne) by phore pbsite at The perso employee,	o SDU/Tribal Pay ithholder: If y ne at (312) 803 at: www.ChildSuc ome status notic re and family Se cago IL 60664-10 If the employe ne at (312) 803 www.ChildSupport on completing the	/ee; /ou have any ques -7253, Toll free portIllinois.com e and other corr ervices Division 97 ee/obligor has qu -7253, Toll Free tillinois.com.	Final payment am tions, contact the Inco : 1-888-245-1938 , by f espodence to: of Child Support Servi estions, contact the In : 1-888-245-1938 , by f	me Withholding Unit ax at (888) 227-0370

Employer's Name: BNSF RAILWAY COMPANY Employer FEIN:

97 / 77 # 2197 779 217: :MA74:00;41-00-21

7

1) The payor shall deduct the amount designated in the income withholding notice, as supplemented by any notice provided pursuant to section 45(f) of the Income Withholding for Support Act, beginning no later than the next payment of income which is payable or creditable to the obligor that occurs 14 days following the date the income withholding notice was mailed, sent by facsimile or other electronic means, or placed for personal delivery to or service on the payor. The payor may combine all amounts withheld for the benefit of an obligee or public office into a single payment and transmit the payment with a listing of obligors from whom withholding has been effected. The payor must pay the amount withheld to the State Disbursement Unit within 7 busines days after the date the amount would (but for the duty to withhold income) have been paid or credited to the obligor. If the payor knowingly fails to withhold the amount designated in the Income Withholding Notice or to pay the amount withheld to the State Disbursement Unit within 7 business days after the date the amount would have been paid or credited to the obligor, the payor shall pay a penalty of \$100 for each day that the amount designated in the income withholding notice (whether or not withhold by the payor) is not paid to the State Disbursement Unit after the period of 7 business days has expired. The total penalty for a payor's failure, on one occasion, to withhold or pay to the State Disbursement Unit an amount designated in the income withholding notice may not exceed \$10,000. This penalty may be collected in a civil action which may be brought against the payor in favor of the obligee or public office. An action to collect the penalty may not be brought more than one year after the date of the payor's alleged failure to withhold or pay income. For each withholding, the payor shall provide the State Disbursement Unit, at the time of transmittal, with the date the amount would (but for the duty to withhold income) have been paid to credited to the o

- 2) If any unpaid arrearage or delinquency equal to at least one month's support obligation exists on the termination date stated in the order for support or, if there is no termination date stated in the order, on the date the child attains the age of majority or is otherwise emancipated, then the periodic amount required to be paid for current support of that child immediately prior to that date shall automatically continue to be an obligation, not as current support but as periodic payment toward satisfaction of the unpaid arrearage or delinquency. That periodic payment shall be in addition to any periodic payment previously required for satisfaction of the arrearage or delinquency. The total periodic amount to be paid toward satisfaction of the arrearage or delinquency may be enforced and collected by any method provided by law for the enforcement and collection of child support, including but not limited to income withholding under the Income withholding for Support Act.
- 3) Income available for withholding shall be applied first to the current support obligation, then to any premium required for employer, labor union, or trade union related health insurance coverage ordered under the order for support, and then to payments required on past-due support obligations. If there is insufficient available income remaining to pay the full amount of the required health insurance premium after withholding of income for the current support obligation, then the remaining available income shall be applied to payments required on past-due support obligations. If the payor has been served with more than one income withholding notice pertaining to the same obligor, the payor shall allocate income available for withholding on a proportionate share basis, giving priority to current support payments. No payor shall discharge, discipline, refuse to hire or otherwise penalize an obligor because of the duty to withhold income. Where a payor willfully fails to withhold or pay over income pursuant to a properly served income withholding notice, or willfully discharges, disciplines, refuses to hire or otherwise penalizes an obligor, or otherwise fails to comply with any duties imposed by the Income withholding for Support Act, the obligee, public office or obligor, as appropriate, may file a complaint with the court against the payor. Upon a finding in favor of the complaining party, the court shall enter judgment and direct the enforcement thereof for the total amount that the payor willfully failed to withhold or pay over; and may order employment or reinstatement of or restitution to the obligor, or both, where the obligor has been discharged, disciplined, denied employment or otherwise penalized by the payor and may impose a fine upon the payor not to exceed \$200.
- 4) If an obligee who is receiving income withholding payments under the Income Withholding for Support Act does not receive a payment required under the income withholding notice, he or she must give written notice of the non-receipt to the payor. The notice must

041714

CO1055196

135769925

123066953

2007D0080461

HFS 3683 (R-12-12) (SEQ: 15348) include the date on which the obligee believes the payment was to have been made and the amount of the payment. The obligee must send the notice to the payor by certified mail, return receipt requested. After receiving a written notice of non-receipt of payment under section 45(j) of the Income Withholding for Support Act, a payor must, within 14 days thereafter, either (i) notify the obligee of the reason for the non-receipt of payment or (ii) make the required payment, together with interest at the rate of 8% calculated from the date on which the payment of income should have been made. A payor who fails to comply with section 45(j) of the Income Withholding for Support Act is subject to the \$100 per day penalty provided pursuant to subsection (a) of Section 35 of the Income Withholding for Support Act.

Rights, Remedies and Duties of the Obligor Under Illinois Law:

- 1) An employer cannot discharge, discipline, refuse to hire, or otherwise penalize the obligor because of the duty to withhold. If the employer does so, the employer may be ordered to reinstate or provide restitution to the obligor, or both, and may be fined up to \$200, pursuant to a complaint filed by the obligor in the circuit court. The obligor is required by law to notify the Department/Clerk of the Circuit Court of any new address or employer within 7 days of the change. At any time after the initial service of the income withholding notice, the Department may serve any employer with the same income withholding notice without further notice to the obligor. New service of an income withholding notice is not required in order to resume withholding of income in the case of an obligor with respect to whom an income withholding notice was previously served on the payor if withholding of income was terminated becase of an interruption in the obligor's employment of less than 180 days.
- 2) If any unpaid arrearage or delinquency equal to at least one month's support obligation exists on the termination date stated in the order for support or, if there is no termination date stated in the order, on the date the child attains the age of majority or is otherwise emancipated, then the periodic amount required to be paid for current support of that child immediately prior to that date shall automatically continue to be an obligation, not as current support but as periodic payment toward satisfaction of the unpaid arrearage or delinquency. That periodic payment shall be in addition to any periodic payment previously required for satisfaction of the arrearage or delinquency. The total periodic amount to be paid toward satisfaction of the arrearage or delinquency may be enforced and collected by any method provided by law for the enforcement and collection of child support, including but not limited to income withholding under the Income Withholding for Support Act.
- 3) The obligor may contest initiated income withholding under Section 30 of the Income Withholding for Support Act, or the obligor may contest income withholding after accrual of delinquency under Section 25 of the Act, by filing a petition to contest withholding with the Clerk of the Circuit Court if the order was issued by the court, or petitioning the Department if the order for support was issued administratively by the Department. The obligor must file the petition within 20 days after service of a copy of the income withholding notice. However, as required by law, the grounds for the request to contest the initiated income withholding shall be limited to whether the parties' written agreement providing an alternative arrangement to immediate withholding continues to ensure payment of support, or misidentification of the obligor. As required by law, the grounds for the petition to contest withholding after accrual of delinquency shall be limited to a dispute concerning the existence or amount of the delinquency, or misidentification of the obligor. The obligor may, at any time, file with the Circuit Clerk or Department a petition to correct a term contained in an income withholding notice to conform to the terms stated in the underlying order for support for the amount of current support, the amount of the arrearage, the periodic amount for payment of the arrearage, or the periodic amount for payment of the delinquency, or to modify, suspend or terminate the income withholding notice because of a modification, suspension or termination of the underlying order for support; or, suspend the income withholding because of inability to deliver income withheld to the obligee due to the obligee's failure to provide a mailing address or other means of delivery. Any obligee, public office or obligor who willfully initiates a false proceeding under the Income Withholding for Support Act may be punished as in cases of contempt of court.

041714

м

G

Е

D

2

0

1

4

0 4

1

7

CQ1055196

135769925

123066953

200700080461

HFS 3683 (R-12-12) (SEQ: 1535F)